

DoD Space Planning Criteria for Health Facilities

Nursing Units

4.1.1 PURPOSE AND SCOPE

This section provides draft guidance for the space planning criteria for nursing unit activities in DoD medical facilities.

Nursing Units, as used in these criteria, do not include the following functional areas that are included in other specific criteria:

- Post-anesthesia recovery surgery units.
- Psychiatric units
- Nurseries, Post-partum/ OB, Labor & Delivery antepartum beds.
- Offices for chief/director, assistant chief/directors, hospital or clinic administrative activities and administrative assistants/superintendents of nursing service.
- Office for physicians, nurse practitioners, administrative assistance, social workers, psychologists, etc. Space is provided in the associated clinics.
- Offices for nursing administrative activities, staff education, patient resource libraries.

4.1.2 DEFINITIONS

Nursing units are those groups of rooms and facilities that are required for the nursing care of hospital inpatients including intensive, acute and minimal care patients. These units include, but are not limited to, the following services: Medical-Surgical; Intensive Care; Coronary Care; Psychiatric (including alcohol rehabilitation); Pediatrics; and Minimal Care. The pediatric and minimal care nursing units do not have separate criteria. A nursing unit consists of, but is not limited to, the following:

- Patient bedrooms with showers, toilets, and lavatories.
- Nurses' station area includes the nursing station with a monitor area, computer area, nurse workroom/charting area, medication preparation/unit dose drug room, and physician workrooms.
- Support facilities which include soiled utility, clean linen room, trash/soiled linen collection, nourishment center/galley/pantry, litter and wheelchair storage, treatment room, supply and equipment area, janitor's closet, Charge/Head nurse office, senior corpsman/NCOIC office, nursing conference room, staff lounge, staff lockers, and staff toilets.

4.1.3 POLICIES

Single patient rooms: It is recommended that most, if not all, beds on a unit be single patient rooms. Each of the single patient bedrooms will have mobilization capacity to expand to two beds.

Two-patient rooms: A small percentage of a unit's beds can be two-patient rooms based on the individual Services needs.

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Nursing Units Sizes:

One Surgical unit is 36 patient beds or less. If greater than 36 beds, round to next number divisible by 4, divide by 36 to determine number of surgical units; divide total beds evenly into the number of units. Surgical units need to be sized in multiples of 4.

One Medical unit is 24 beds or less. If greater than 24 beds, round to next number divisible by 4, divide by 24 to determine number of medical units; divide total beds evenly into the number of units. Medical units need to be sized in multiples of 4.

A combination Medical/Surgical unit shall not exceed 24 beds.

ICU/CCU unit shall not exceed 12 beds.

The following are extracts from the American Institute of Architects Academy of Architecture for Health, 2001 Edition:

Airborne Infection Isolation Room (negative pressure): There will be a minimum of one isolation bed per unit. Each facility should have an Infection Control Risk Assessment (see CDC guidelines) to determine if the patient population served requires an increased number. An anteroom with lavatory is not required, but may be provided for each isolation room. A space for storing protective equipment is required.

Protective Environment Room (positive pressure): When determined by an Infection Control Risk Assessment (ICRA), special design considerations and air ventilation to ensure the protection of immunosuppressed patients. The ICRA will conclude the appropriate number and location for the protective environment rooms. Each protective room shall have an area for hand washing, gowning, and storage of clean and soiled materials immediately near the entry door to the room.

Seclusion room: Each inpatient facility should provide one or more single bedrooms for patients needing close supervision for medical and/or psychiatric care. This may be on a psychiatric unit as described in Section 4.6. Each seclusion room will include an anteroom with entry to the bathroom through the anteroom.

Intensive Care will have at least one airborne infection isolation room. Additional rooms may be provided based on the ICRA for that facility. "This room does not require a private bathroom."

Intensive Care and Coronary Care Units: The number of Intensive Care Unit (ICU) and Cardiac Care Unit (CCU) beds will be supported by special justification. The justification will address factors such as hospital mission, expected mission change, projected workload, and geographical location. If space is requested for a laboratory to support these special care functions, it will be supported by special justification. Toilet facilities will be

Bedrooms: The single patient bedroom includes space for the bed, a sleeper chair, side table and a side chair for families/visitors. This can be used for rooming in or can be turned into space for

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another bed for mobilization. Each patient room includes a stand-up charting area with flip down table, a wardrobe for personal property and TV with DVD player.

Patient bathrooms will consist of one toilet and one shower, with the lavatory. A second lavatory will be located within the bedroom for staff hand washing.

4.1.4 PROGRAM DATA REQUIRED

Bed requirements, by specialty, determined from the DoD bed sizing confidence criteria.

Identification of teaching/non-teaching hospitals

Projected total staffing requirements by nursing unit

Project staff requiring a private office

Projected administrative staff assigned to the unit requiring a workstation

Analysis of ICU/CCU bed requirements

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FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m ²	nsf	

5.0 SPACE CRITERIA

The spaces listed below are normally required for nursing units in DoD hospitals. It is not intended that planners include all functional areas listed herein, unless there is a valid requirement at the installation under consideration.

INPATIENT BEDROOMS

Minimal Care Bedroom, 1 Bed	BRLC1	15.79	170	
Minimal Care Bedroom, 2 Bed	BRLC2	22.30	240	
Medical/Surgical Bedroom, 1 Bed	BRMS1	22.30	240	
Medical/Surgical Bedroom, 2 Bed	BRMS2	37.16	400	
Medical / Surgical Bedroom, Isolation, Negative Pressure	BRIT1	22.30	240	
Medical / Surgical Bedroom, Isolation, Positive Pressure	BRIT2	22.30	240	
Bedroom, Isolation Anteroom, Positive pressure	BRAR1	3.72	40	
Universal Bedroom	BRUN1	37.16	400	
Intensive Care/Coronary Care Bedroom	BRIC1	23.23	250	
Intensive Care/Coronary Care Isolation Bedroom	BRII1	23.23	250	Includes space for toilet.
Inpatient Bathroom (GP)	TLTS2	5.57	60	One per Inpatient bedroom.
Inpatient Shower Room	SHWR2	9.29	100	For non-ambulatory patients.

PATIENT SUPPORT AREA

Inpatient Physical Therapy Treatment cubicle (GP)	PTTC1	13.01	140	If in clinic concept of operations. Located on the unit. Provides space for exercise stations, treatment station and wall storage. NOTE: This requirement is restated in inpatient section.
Inpatient Physical Therapy - Exercise station	PTES1	18.58	200	If in clinic concept of operations. Located on the unit. Provides space for exercise stations, treatment station and wall storage. NOTE: This requirement is restated in inpatient section.
Nourishment Center (GP)	NCWD1	9.29	100	One per unit.

FAMILY / VISITOR AREA (MAY BE SHARED BETWEEN NURSING UNITS)

Family Waiting/Day Room	WRF01	11.15	120	Med/Surg - Minimum, 10 nsf per bed; ICU/CCU - Minimum, 20 nsf per bed;
Public Toilet	TLTU1	5.57	60	Minimum. See Section 6.1 for increase sizing.
Consultation Room	OFDC2	11.15	120	One per unit.
Playroom	PLAY1	14.86	160	One per dedicated pediatric unit

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FAMILY / VISITOR AREA CONTINUED

Playroom Storage	SRS01	5.57	40	One per pediatric playroom.
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STAFF AND ADMINISTRATIVE AREAS (PER NURSING UNIT)

Nurse Station	NSTA1	13.94	150	Minimum, for the first 6 beds. Add 5 nsf for each bed over 6. One per unit.
Nurse Sub-Station	NSTA3	7.43	80	If in concept of operations.
Nurse Workroom	WRCH1	11.15	120	Army/Navy.
	OFA03	5.57	60	Two per unit in lieu of Nurse Workroom (Air Force/VA).
Conference/Report Room	CRA01	18.58	200	One per unit.
Physician Charting/Dictation	WRCH1	7.43	80	One per unit.
On-Call Sleep Room (GP)	DUTY1	11.15	120	If required.
On Call Toilet/Shower	TLTS1	5.57	60	One per On-Call room.
Nurse Supervisor Office	OFA01	11.15	120	Private office, standard furniture: One per unit.
	OFA02	11.15	120	Private office, system furniture.
NCOIC/LCPO/LPO/SMT Office	OFA01	11.15	120	One per unit.
	OFA02			
Private Office	OFA01	11.15	120	One per FTE requiring a private office.
	OFA02			
Administrative Cubicle	OFA03	5.57	60	One per FTE requiring an admin cubicle.
Central Monitor Server	CMP02	5.57	60	Required for ICU, can be provided on other units if central monitoring is required for telemetry, patient monitors, etc.

STAFF SUPPORT AREAS (PER NURSING UNIT)

Staff Lounge	SL001	13.01	140	One per unit.
Staff Toilet	TLTU1	5.57	60	See Section 6.1
Personal Property Lockers	LR001	1.86	20	See Section 6.1
Clean Utility	UCCL1	11.15	120	Minimum, for the first 12 beds. Add 5 nsf per bed
Soiled Utility	USCL1	9.29	100	One per unit.
Clean Linen	UCCL1	5.57	60	One per unit.
Trash and Linen Collection	UTLC1	11.15	120	One per unit.
Equipment Storage	SRSE1	9.29	100	One per unit.
Medical Gas Storage	SRGC2	4.65	50	If needed in concept of operations
Janitor Closet	JANC1	3.72	40	Minimum of one closet per nursing floor. See Section 6.1.
Orthopedic Equipment Storage	SRS01	7.43	80	If Orthopedic patients on unit.

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STAFF SUPPORT AREAS CONTINUED

Pediatric Equipment Storage	SRE01	13.01	140	If Pediatric patients on unit, to store cribs/beds.
Crash Cart Alcove	RCA01	3.72	40	One per unit
Mobile X-Ray Alcove	XRM01	3.72	40	One per unit
Stretcher/Wheelchair Alcove	SRLW1	7.43	80	One per unit
Laboratory, Blood Gas	LBBG2	9.29	100	If in concept of operations for ICU/CCU.